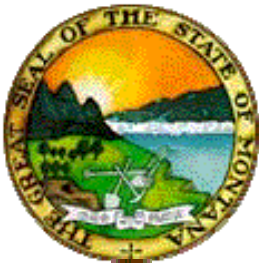


Perceptions of Mental Health Services

2005 Adult Consumer Survey



Perceptions of Adult Consumers of Publicly Funded Mental Health Services in Montana

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Montana Adult Consumer Satisfaction Project

Fiscal Year 2005 Report

Introduction

The Mental Health Services Bureau (MHSB) of the Addictive and Mental Disorders Division (AMDD) conducts the Montana Consumer Satisfaction Project. Funding support is provided by the Data Infrastructure Grant from the Substance Abuse and Mental Health Services Administration. MHSB administers a survey to Montana mental health service consumers annually, with the goal of eliciting consumer opinions regarding the overall quality of Montana's mental health care system. This report details the statewide results of the FY2005 Montana Adult Consumer Satisfaction Survey, administered from October through December of 2005. The report reflects survey results from only outpatient adult consumers who have received case management services at any time during FY2005.

Adult Survey Quick Facts

- Participating providers: 5
- Surveys completed and collected: 708
- Average age: 47
- Gender: 68% female, 32% male
- Average time in services: 7.64 years

Scale Scores (0-1)

- Access to Services: .80
- Appropriateness/Quality of Services: .77

Survey Methods

Instrument: Montana's survey instrument is the national 28-item Mental Health Statistics Improvement Program (MHSIP) Satisfaction Survey. The survey has been nationally standardized and is required of all states as part of an annual data report submitted to the National Center for Mental Health Services. Montana's survey results can, therefore, be compared with those of other similar states, who have used similar target populations, and similar methods of administration. However, due to differences in state mental or behavioral health systems, state-to-state comparisons should be done with extreme caution. Demographic and descriptive items gather information on gender and ethnicity, the type of services a participant is receiving, and the length of time a participant has been receiving services. The

instrument also contains a section where participants can comment either on specific survey items or about their general perceptions of the programs where they receive services.

Administration: This year the surveys were distributed directly to recipients by mail. This method of distribution is the same as last year, which was the first year to use this method (see last year's report for more information). Each envelope contained a cover letter that explained the goal of the survey and the importance of consumer input, a three-page survey, a self-addressed stamped envelope, and an entry form for a lottery to win a \$50 gift certificate to his/her local grocery store. To maintain confidentiality, the return address used for the Addictive and Mental Disorders Division was the name of the Quality Assurance Manager and the Division's post office mailing address. The cover letter also contained a toll-free telephone number to call if respondents had any questions, comments, or concerns regarding the survey.

Completion Rate: The appendix contains the number of surveys returned by consumers, sorted by the five providers of adult targeted case management. There were 2,785 surveys mailed out and 738 returned, resulting in an overall return rate of 27%. Of the 2,785 surveys sent out, 540 were initially returned undeliverable, due to incorrect or outdated addresses. Our staff was able to locate new addresses for 120, resulting in 420 surveys (15%) that were declared undeliverable. Thirty surveys were eliminated from analysis because they were incomplete. The final sample size was 708 surveys, placing it within the 95% confidence level, with an interval of +/-4. This means, for example, that if 47% of the sample answered yes to a question, we can be sure that if the entire mental health service population had been asked, between 43% and 51% would have answered similarly.

Validity of the Data: To ensure scale validity, each scale analysis included only those surveys in which at least 75% of the scale items had been answered (and for one scale of three items, 66% and for one scale of two items, 50%). Regarding generalizability to rural populations, 97 surveys (14% of the sample) were received from clients living in rural counties.

Analysis

Information gathered from Consumer Satisfaction Surveys is analyzed on a statewide level. In addition, providers receive a summarized report of consumers of their services that can be compared to the state average. *This* report contains only the statewide results. Some of the analyses use the scale scores and others use the responses to individual items.

The analysis measures satisfaction in five domains, or scales. These scales – *Perception of Access* to services, *Perception of Quality/Appropriateness* of services, *Perception of Outcomes*, *Perception of Participation in Treatment Planning*, and *General Satisfaction* - are common to all U.S. states that administer the MHSIP Survey.

1. Access: Entry into mental health services is quick, easy, and convenient
2. Appropriateness/Quality: Services are individualized to address a consumer's strengths and weaknesses, cultural context, preference, and recovery goals.

3. Effectiveness/Outcomes: The extent to which services provided to individuals with emotional and behavior disorders have a positive or negative effect on their well-being, life circumstances, and capacity for self-management and recovery.
4. Participation in Treatment Planning: Consumer is encouraged to be control of treatment goals.
5. Satisfaction: Overall satisfaction with services provided.

How to Understand the Scores

Appendix A displays data for each item in all seven scale domains and an extra item that did not belong to any particular domain. Appendix B shows each scale, and the survey items included in that scale. Each item is listed by the frequency of responses. The most noteworthy statistic for each item is the cumulative percent of “Strongly Agree” and “Agree,” indicating the proportion of people responding positively to the item. For each of the five scales, the “proportion positives” for all scale items were averaged to provide the overall score for the scale, which varies in value from 0 to 1. For example, a score of .89 indicates that 89% of the sample either strongly agreed, or agreed with the statement.

Survey Results

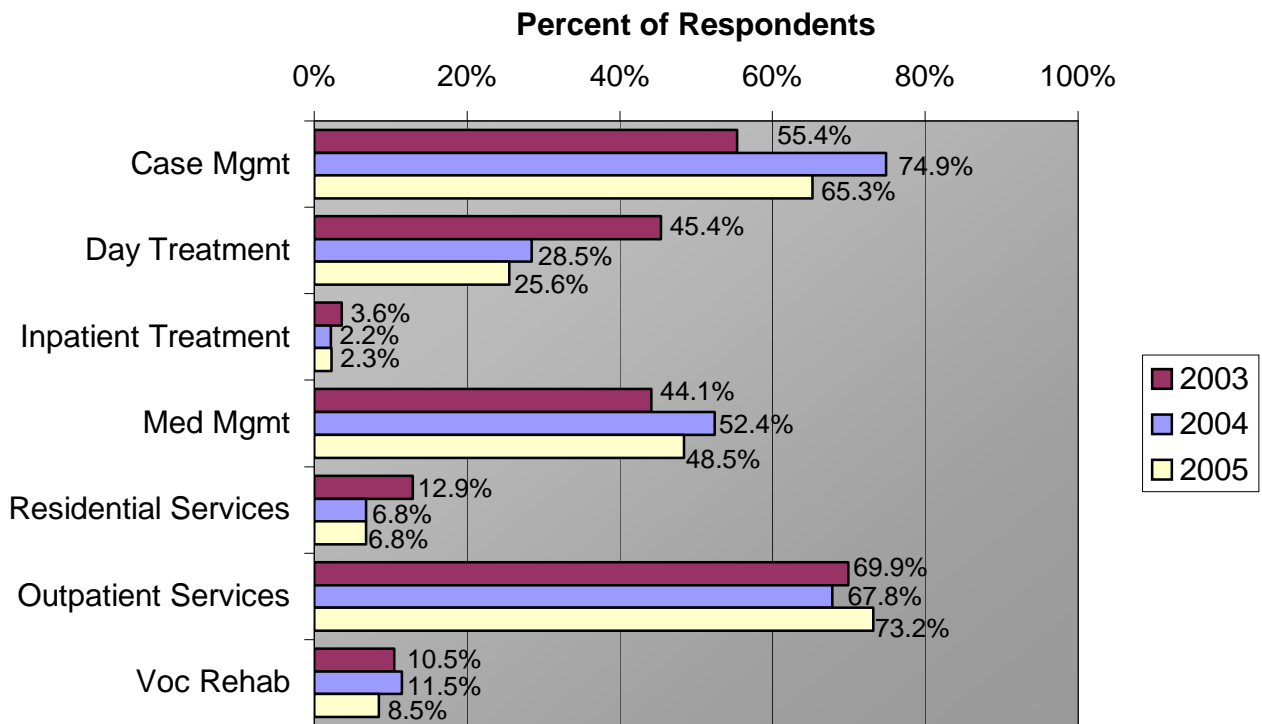
Demographics -

A total of 708 adult surveys were returned complete enough for analysis. This is 4.9% of all Montana adult public mental health care recipients, within the 95% confidence level in a power analysis. Female respondents numbered 481 (68% of the sample). This number represents 4.97% of Montana women who received a public mental health service in FY2005. Men numbered 214, representing 4.5% of all Montana men who received services last year. Thirteen respondents did not indicate gender. Ages ranged from 19 to 93 years old, with an average age of 47, the same reported in the 2003 sample and four years older than the average age in the 2003 sample. Ninety-one percent of the sample was Caucasian, and 10% was Native American. Seventeen (2.4%) reported being of Hispanic ethnicity. Thirty-three respondents reported more than one ethnicity and nine did not respond to the question. Ninety-seven (14%) respondents reported living in a rural community. One hundred and ninety-eight (28% of the sample) were funded by the State Mental Health Services Plan. The other 471 respondents had Medicaid. Thirty nine individuals skipped this question. The average time these individuals had been in public mental health services was 5½ years.

Services Received –

The chart below shows the percentage of respondents receiving various services at the time of the survey. Note that the sample was selected based on respondents having received case management services *at any time during the past year*. Thirty-five percent of the sample was not receiving case management at the time of the survey.

Services Received by Survey Respondents



Services provided by:

Provider	2005	2004	2003
AWARE, Inc	12	6	15
EMCMHC	63	30	85
GTCMHC	186	24	211
SCMRMHC	139	79	134
WMMHC	308	268	135

Scale Scores –

The chart below shows the percentage of positive responses (a rating of agree or strongly agree; numbered 1 or 2) for each scale for 2003, 2004, and 2005.

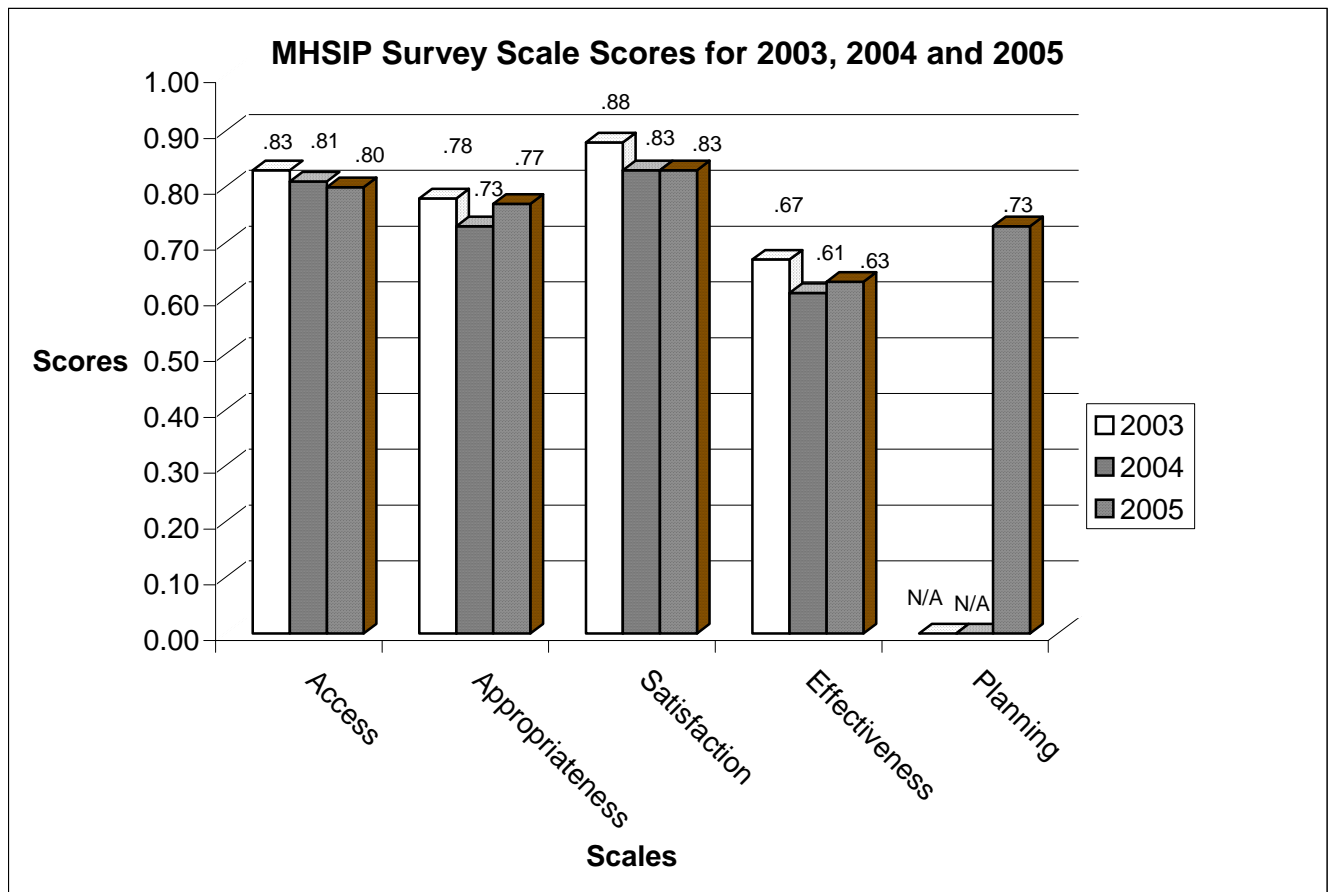
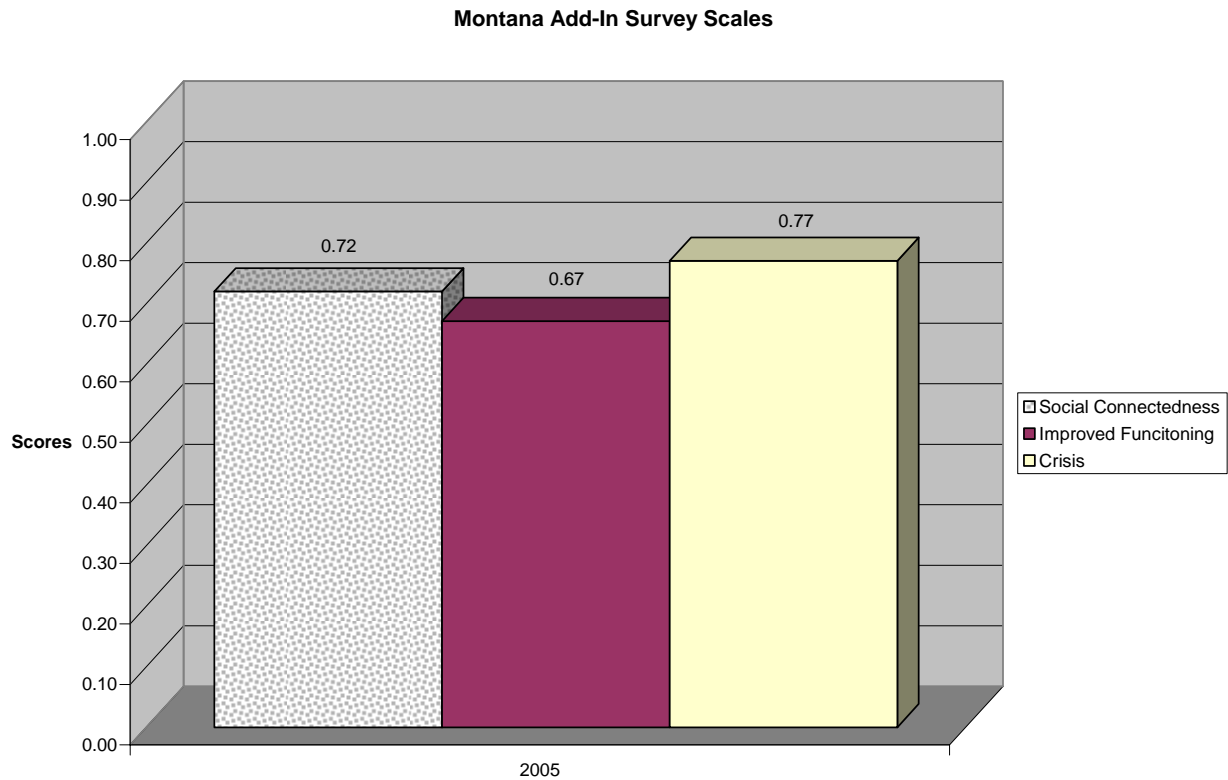


Table 1. Comparison of MHSIP Scale Scores for 2003, 2004, and 2005

	<u>Access</u>	<u>Appropriateness</u>	<u>Satisfaction</u>	<u>Effectiveness</u>	<u>Planning</u>
2003	.83	.78	.88	.67	N/A
2004	.81	.73	.83	.61	N/A
2005	.80	.77	.83	.63	.73

In addition to the standard MHSIP 28 item survey, Montana added 11 unique questions. Six of these questions related to social connectedness and four to improved functioning. The last question related to Montana's attention to the perception of the availability and effectiveness of crisis services. The individual questions and their respective statistics are listed in the appendix.

The following chart presents a synopsis of the percentage of positive responses (a rating of “Strongly Agree or “Agree”) for both scales and the independent crisis question. Because 2005 is the first year this data have been collected, there is no comparison base from previous years.



Survey Questions Showing Significant Change Over the Past Two Years

ITEMS WITH A SIGNIFICANT DIFFERENCE IN OVERALL SCORES	2004	2005	P Value
Q16: Staff told me what medication side effects to watch out for.	.67	.66	0.00
Q17: Staff respected my wishes about who is and who is not to be given information about my treatment.	.85	.82	0.00
Q18: I, not staff, decided my treatment goals.	.65	.62	0.01
Q27: I do better in school and/or work.	.57	.56	0.02

The above table shows the items from 2004 and 2005 that had a significant difference between the percent positive scores for two years. These items reflect a significant drop in consumer satisfaction between year 2004 and 2005.

Highest and Lowest Scores for 2005 and 2004

Top Five Responses. Tables 2 and 3 show the five items receiving the highest proportion of positive responses for 2005 and 2004.

Table 2. High scores from 2005

Top Five – Highest Positively Ranked Items		
Rank (Not Item #)	Survey Item	Score
#1	I liked the services that I received here.	.86
#2A	I was given information about my rights.	.84
#2B	Services were available at times that were good for me.	.84
#3A	Staff respected my wishes about who is and who is not to be given information about my treatment.	.82
#3B	I felt comfortable asking questions about my treatment and medications.	.82
#4	I would recommend this agency to a friend or family member.	.80

The highest-ranking items come from the Access, Quality/Appropriateness, Treatment Planning, and Satisfaction scales. This general satisfaction with staff and services is mirrored in participants' comments, which often single out a particular staff member as helpful. The highest-ranking item, "I liked the services that I received here," was endorsed significantly more often by women (87%) than by men (82%).

Table 3. High scores from 2004

Top Five – Highest Positively Ranked Items		
Rank (Not Item #)	Survey Item	Score
#1	Services were available at times that were good for me.	.89
#2	I liked the services that I received here.	.87
#3A	I was given information about my rights.	.85
#3B	Staff respected my wishes about who is and who is not to be given information about my treatment.	.85
#4	I would recommend this agency to a friend or family member.	.84

Tables 4 and 5 show the lowest-ranking scores for 2005 and 2004.

Table 4. Low scores from 2005

Bottom Five – Lowest Positively Ranked Items		
Rank (Not Item #)	Survey Item	Score
#28	I do better in school and/or work.	.32
#27	I do better in social situations.	.54
#26	My symptoms are not bothering me as much.	.58
#25A	My housing situation has improved.	.62
#25B	I am getting along better with my family.	.62
#25C	I, not staff, decided my treatment goals.	.62

All but one of the items in Table 4 are from the Effectiveness/Outcomes Scale. This scale is typically the lowest scoring scale on the survey, nationally as well as in Montana. Item 28, “I do better in school and/or work,” was unusually low in both the 2004 and 2005 surveys. This is partially because 39% of respondents selected “does not apply” for their answer, the same as last year, and a significant increase over the previous year’s 8%. School and employment are considered to be productive and meaningful activities, and thus, important treatment outcome measures. It is not clear whether those who answered “does not apply” had good reason to believe that school and work were not appropriate for them, or whether they simply believed it would not be possible for them. The latter may speak to consumers’ beliefs in their ability to recover. The reported dissatisfaction with school and/or work performance did not differ significantly by gender this past year (33% of women and 29% of men). The second least popular item, “I do better in social situations,” was significantly less popular with men (48%) than with women (56%). The same trend was true for the third least popular statement “My symptoms are not bothering me as much” with women rating a 60% and men rating lower at 54%. There were no significant gender differences in the other top ranked survey items.

Table 5. Low scores from 2004

Bottom Five – Lowest Positively Ranked Items		
Rank (Not Item #)	Survey Item	Score
#28	I do better in school and/or work.	.31
#27	My housing situation has improved.	.57
#26	I do better in social situations.	.57
#25	My symptoms don't bother me as much as they use to.	.63
#24	I, not staff, decided my treatment goals.	.63

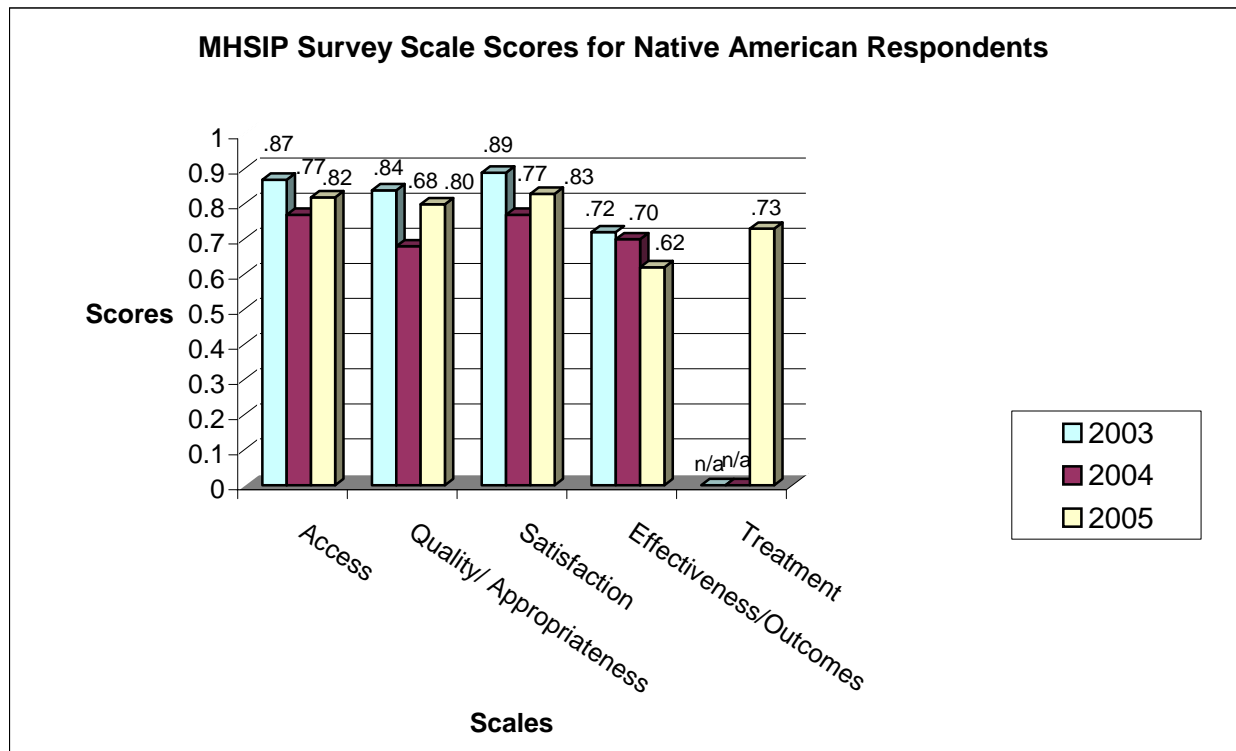
Similar to the 2005 scores in Table 4, the majority of the Table 5 2004 scores are from the Effectiveness/Outcomes scale, as was also true for 2003 scores. For all three years, these lower scores suggest that mental health care recipients have an appreciation for the quality and availability of services they receive, but continue to struggle in achieving positive change in their lives.

Native American Representation

Sixty-nine adult Native Americans completed the MHSIP survey (4.9% of 1,406 served in SFY2005). This contrasts with last year's numbers as follows – Thirty-six Native American respondents were included in the 2004 survey analysis (2.5% of 1,437 served in SFY2004). Due to the smaller population of Native American mental health care consumers, a sample of over 300 would be required to reach the 95% confidence level. However, smaller sample sizes yield valid and useful information.

Of the 69 respondents in 2005, 22 were male and 45 were female, two did not indicate gender. These numbers represent 4.5% of Native American female adults served, and 5.6% of adult males. For men, ages ranged from 26-58 years old, with an average age of 43. Women's ages ranged from 24-73, with an average age of 47. When asked about their tribal affiliations, 53 consumers identified tribal affiliations representing 15 tribes.

Scale Scores. The chart below shows the overall score for each scale.



The 2005 scales Access, Appropriateness/Quality, and Satisfaction were significantly higher than those for 2004 for the Native American sample. The 2005 Effectiveness/Outcomes scale was significantly lower than 2004.

Regarding differences in scale scores between Native American and non-Native American groups, although some appear to be different, *they did not reach statistical significance*, due to the differences in the sample sizes and variability of responses (see Table 6 below).

Table 6. Comparison of Native American Scores with those of non-Native Americans- 2005

Sample	Access	Appropriateness	Satisfaction	Effectiveness	Treatment
Native American Respondents	.82	.80	.83	.62	.73
Non-Native American Respondents	.80	.77	.83	.63	.73

Survey Questions Showing Significant Change Over the Past Two Years

ITEMS WITH A SIGNIFICANT DIFFERENCE IN OVERALL SCORES	2004	2005	P Value	Point Change
Q27: I do better in school and/or work.	1.91	2.82	0.00	-0.91
Q18: I, not staff, decided my treatment goals.	1.78	2.39	0.01	-0.61
Q24: I am better able to deal with crisis.	2.00	2.57	0.02	-0.57
Q21: I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).	1.91	2.48	0.02	-0.57
Q16: Staff told me what medication side effects to watch out for.	1.68	2.25	0.02	-0.57
Q17: Staff respected my wishes about who is and who is not to be given information about my treatment.	2.55	1.96	0.02	0.59

Note: The lower the mean, the more positively the overall item scored.

The above table shows the items from 2004 and 2005 that had a significant difference between the mean scores for two years among Native American respondents. The columns labeled '2004' and '2005' present score averages (means) for each item. The lower the mean, the more positively the overall item scored. For example, the first item listed "I do better in school and/or work," scored a mean of 1.91 in 2004 and a mean of 2.82 in 2005. This is a significant drop in consumer satisfaction by almost a whole point between year 2004 and 2005. Items with a negative point change represent a drop in consumer satisfaction. Five of the six items showing significant change between the two years showed a negative change. Overall, the Perception of Quality Scale showed the most items with a significant change (3) compared to the other scales.

Top and Bottom Five Responses by Native Americans - 2005

Top Five. Table 8 shows the five items receiving the *highest* proportion of positive responses by Native American service recipients. The highest-ranking items address every scale, indicating a high level of satisfaction with at least some aspect of access, appropriateness/quality, satisfaction, and effectiveness/outcomes. Two items tied for first place and four items tied for third place. In 2004 one of the top three items, "My housing situation has improved," was ranked in 2003 next to the bottom, indicating that either the Native American consumers experienced an improvement in housing during 2004, or this particular sample of Native Americans had a different experience with housing. In 2005 this item is back in the bottom five, indicating a reduction in satisfaction. Either last year's ranking was an anomaly in the scores or the sample had a unique experience relative to the other two year samples. The top three items in 2005 were not present in the top five of 2004.

Table 8.

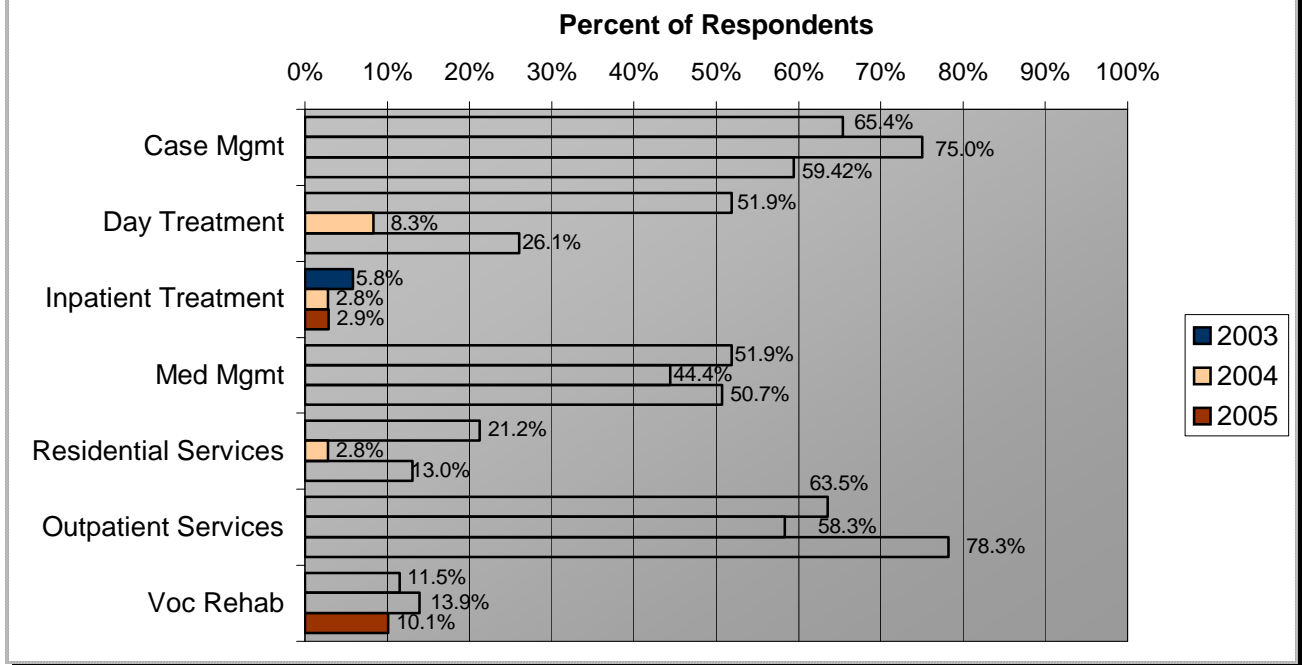
Top Five – Highest Positively Ranked Items by Native American Service Recipients-2005		
Rank (Not Item #)	Survey Item	Score
#1	Staff returned my call in 24 hours.	0.91
#1	I was given information about my rights.	0.91
#2	I would recommend this agency to a friend or family member.	0.87
#3	I felt comfortable asking questions about my treatment and medication.	0.85
#3	I like the services that I received here.	0.85
#3	Services were available at times that were good for me.	0.85
#3	Staff respected my wishes about who is and who is not to be given information about my treatment.	0.85
#4	I felt free to complain.	0.83
#5	Staff was willing to see me as often as I thought it was necessary.	0.82

Table 9 below shows the lowest ranked survey items by Native Americans for 2005.

Table 9.

Bottom Five – Lowest Positively Ranked Items By Native American Service Recipients - 2005		
Rank (Not Item #)	Survey Item	Score
#28	I do better in school and/or work.	0.40
#27	I do better in social situations.	0.49
#26	My housing situation has improved.	0.58
#25	I, not staff, decided my treatment goals.	0.60
#24	My symptoms don't bother me as much as they used to.	0.63

Services Received by Native American Survey Respondents



Services provided by:

Provider	2005	2004
AWARE, Inc	5	3
EMCMHC	5	2
GTCMHC	28	5
SCMRMHC	12	6
WMMHC	19	20

Summary

Four major mental health providers participated in the MHSIP Consumer Satisfaction Survey project. A total of 708 surveys were returned complete enough for analysis. Analysis of the surveys revealed that, overall, Montana mental health care recipients are satisfied with access to services, and the quality and appropriateness of those services.

The 2005 survey was the second year that a mail-out method of distribution was used. The return rate was encouraging for this method, although further efforts must be made to adequately sample Native American service consumers.

Consumers reported that they are less satisfied with their progress toward recovery than with the overall quality and access to services - a finding shared by consumers in other states. This could be due in part to the severity of illness that our mental health clients experience. This means that treatment will be difficult, and improvement will often occur in small increments. Our mental health care system must continue to strive toward state-of-the-art treatment models, and a philosophy that encourages and supports recovery for our citizens with serious mental illness.

Appendix A

MHSIP Survey Item Responses and Demographic Information 2005 Survey

Access Scale

Q4: The location of services was convenient.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	312	44.07%	312	44.07%
Agree	233	32.91%	545	76.98%
I am Neutral	91	12.85%	636	89.83%
Disagree	48	6.78%	684	96.61%
Strongly Disagree	20	2.82%	704	99.44%
Doesn't Apply	4	0.56%	708	100.00%

Frequency missing = 0

Q5: Staff was willing to see me as often as necessary.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	325	46.10%	325	46.10%
Agree	239	33.90%	564	80.00%
I am Neutral	68	9.65%	632	89.65%
Disagree	44	6.24%	676	95.89%
Strongly Disagree	22	3.12%	698	99.01%
Doesn't Apply	7	0.99%	705	100.00%

Frequency missing = 3

Q6: Staff returned my calls within 24 hours.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	298	42.51%	298	42.51%
Agree	247	35.24%	545	77.75%
I am Neutral	75	10.70%	620	88.45%
Disagree	38	5.42%	658	93.87%
Doesn't Apply	26	3.71%	684	97.57%
Strongly Disagree	17	2.43%	701	100.00%

Frequency missing = 7

Q7: Services were available at times that were good for me.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	323	45.82%	323	45.82%
Agree	266	37.73%	589	83.55%
I am Neutral	74	10.50%	663	94.04%
Disagree	22	3.12%	685	97.16%
Strongly Disagree	15	2.13%	700	99.29%
Doesn't Apply	5	0.71%	705	100.00%

Frequency missing = 3

Q8: I was able to get all the services I thought I needed.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	306	43.28%	306	43.28%
Agree	247	34.94%	553	78.22%
I am Neutral	66	9.34%	619	87.55%
Disagree	50	7.07%	669	94.63%
Strongly Disagree	36	5.09%	705	99.72%
Doesn't Apply	2	0.28%	707	100.00%

Frequency missing = 1

Q9: I saw my psychiatrist as often as I needed to.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	277	39.40%	277	39.40%
Agree	229	32.57%	506	71.98%
I am Neutral	71	10.10%	577	82.08%
Disagree	49	6.97%	626	89.05%
Doesn't Apply	46	6.54%	672	95.59%
Strongly Disagree	31	4.41%	703	100.00%

Frequency missing = 5

Appropriateness, Quality Scale

Q10: Staff here believe that I can grow, change and recover.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	283	40.49%	283	40.49%
Agree	233	33.33%	516	73.82%
I am Neutral	127	18.17%	643	91.99%
Disagree	27	3.86%	670	95.85%
Strongly Disagree	18	2.58%	688	98.43%
Doesn't Apply	11	1.57%	699	100.00%

Frequency missing = 9

Q13: I felt free to complain.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	262	37.54%	262	37.54%
Agree	224	32.09%	486	69.63%
I am Neutral	109	15.62%	595	85.24%
Disagree	51	7.31%	646	92.55%
Strongly Disagree	41	5.87%	687	98.42%
Doesn't Apply	11	1.58%	698	100.00%

Frequency missing = 10

Q16: Staff told me what medication side effects to watch out for.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	254	36.03%	254	36.03%
Agree	214	30.35%	468	66.38%
I am Neutral	96	13.62%	564	80.00%
Disagree	63	8.94%	627	88.94%
Strongly Disagree	49	6.95%	676	95.89%
Doesn't Apply	29	4.11%	705	100.00%

Frequency missing = 3

Q17: Staff respected my wishes about who is and who is not to be given information about my treatment.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	346	49.15%	346	49.15%
Agree	231	32.81%	577	81.96%
I am Neutral	75	10.65%	652	92.61%
Disagree	21	2.98%	673	95.60%
Strongly Disagree	18	2.56%	691	98.15%
Doesn't Apply	13	1.85%	704	100.00%

Frequency missing = 4

Q19: Staff were sensitive to my cultural background (race, religion, language, etc.).

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	275	39.17%	275	39.17%
Agree	221	31.48%	496	70.66%
I am Neutral	114	16.24%	610	86.89%
Doesn't Apply	61	8.69%	671	95.58%
Disagree	17	2.42%	688	98.01%
Strongly Disagree	14	1.99%	702	100.00%

Frequency missing = 6

Q20: Staff helped me obtain the information I needed so that I could take charge of managing my illness.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	277	39.40%	277	39.40%
Agree	250	35.56%	527	74.96%
I am Neutral	101	14.37%	628	89.33%
Disagree	36	5.12%	664	94.45%
Strongly Disagree	33	4.69%	697	99.15%
Doesn't Apply	6	0.85%	703	100.00%

Frequency missing = 5

Q14: I was given information about my rights.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	345	49.08%	345	49.08%
Agree	246	34.99%	591	84.07%
I am Neutral	61	8.68%	652	92.75%
Disagree	28	3.98%	680	96.73%
Strongly Disagree	19	2.70%	699	99.43%
Doesn't Apply	4	0.57%	703	100.00%

Frequency missing = 5

Q15: Staff encouraged me to take responsibility for how I live my life.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	305	43.20%	305	43.20%
Agree	263	37.25%	568	80.45%
I am Neutral	80	11.33%	648	91.78%
Disagree	26	3.68%	674	95.47%
Doesn't Apply	18	2.55%	692	98.02%
Strongly Disagree	14	1.98%	706	100.00%

Frequency missing = 2

Q21: I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.) .

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	248	35.23%	248	35.23%
Agree	228	32.39%	476	67.61%
I am Neutral	118	16.76%	594	84.38%
Disagree	43	6.11%	637	90.48%
Doesn't Apply	43	6.11%	680	96.59%
Strongly Disagree	24	3.41%	704	100.00%

Frequency missing = 4

Outcomes Scale

Q22: I am better able to handle things when they go wrong.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	263	37.25%	263	37.25%
Strongly Agree	219	31.02%	482	68.27%
I am Neutral	147	20.82%	629	89.09%
Disagree	47	6.66%	676	95.75%
Strongly Disagree	26	3.68%	702	99.43%
Doesn't Apply	4	0.57%	706	100.00%

Frequency missing = 2

Q23: I am better able to control my life.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	271	38.33%	271	38.33%
Strongly Agree	225	31.82%	496	70.16%
I am Neutral	146	20.65%	642	90.81%
Disagree	42	5.94%	684	96.75%
Strongly Disagree	21	2.97%	705	99.72%
Doesn't Apply	2	0.28%	707	100.00%

Frequency missing = 1

Q24: I am better able to deal with crisis.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	269	38.21%	269	38.21%
Strongly Agree	194	27.56%	463	65.77%
I am Neutral	139	19.74%	602	85.51%
Disagree	74	10.51%	676	96.02%
Strongly Disagree	24	3.41%	700	99.43%
Doesn't Apply	4	0.57%	704	100.00%

Frequency missing = 4

Q25: I am getting along better with my family.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	236	33.43%	236	33.43%
Strongly Agree	198	28.05%	434	61.47%
I am Neutral	150	21.25%	584	82.72%
Disagree	53	7.51%	637	90.23%
Doesn't Apply	38	5.38%	675	95.61%
Strongly Disagree	31	4.39%	706	100.00%

Frequency missing = 2

Q26: I do better in social situations.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	221	31.39%	221	31.39%
I am Neutral	174	24.72%	395	56.11%
Strongly Agree	159	22.59%	554	78.69%
Disagree	103	14.63%	657	93.32%
Strongly Disagree	39	5.54%	696	98.86%
Doesn't Apply	8	1.14%	704	100.00%

Frequency missing = 4

Q27: I do better in school and/or work.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Doesn't Apply	255	37.06%	255	37.06%
I am Neutral	129	18.75%	384	55.81%
Strongly Agree	111	16.13%	495	71.95%
Agree	111	16.13%	606	88.08%
Disagree	58	8.43%	664	96.51%
Strongly Disagree	24	3.49%	688	100.00%

Frequency missing = 20

Q29: My symptoms don't bother me as much as they used to.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	239	33.95%	239	33.95%
Strongly Agree	169	24.01%	408	57.95%
I am Neutral	129	18.32%	537	76.28%
Disagree	107	15.20%	644	91.48%
Strongly Disagree	53	7.53%	697	99.01%
Doesn't Apply	7	0.99%	704	100.00%

Frequency missing = 4

Q28: My housing situation has improved.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	223	31.99%	223	31.99%
Strongly Agree	207	29.70%	430	61.69%
I am Neutral	138	19.80%	568	81.49%
Doesn't Apply	48	6.89%	616	88.38%
Disagree	45	6.46%	661	94.84%
Strongly Disagree	36	5.16%	697	100.00%

Frequency missing = 11

Treatment Planning Scale

Q11: I felt comfortable asking questions about my treatment and medication.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	335	47.59%	335	47.59%
Agree	242	34.38%	577	81.96%
I am Neutral	72	10.23%	649	92.19%
Disagree	28	3.98%	677	96.16%
Strongly Disagree	22	3.13%	699	99.29%
Doesn't Apply	5	0.71%	704	100.00%

Frequency missing = 4

Q18: I, not staff, decided my treatment goals.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	228	32.48%	228	32.48%
Strongly Agree	207	29.49%	435	61.97%
I am Neutral	150	21.37%	585	83.33%
Disagree	66	9.40%	651	92.74%
Strongly Disagree	36	5.13%	687	97.86%
Doesn't Apply	15	2.14%	702	100.00%

Frequency missing = 6

Satisfaction Scale

Q1: I like the services that I received here.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	342	48.31%	342	48.31%
Agree	267	37.71%	609	86.02%
I am Neutral	56	7.91%	665	93.93%
Strongly Disagree	23	3.25%	688	97.18%
Disagree	17	2.40%	705	99.58%
Doesn't Apply	3	0.42%	708	100.00%

Frequency missing = 0

Q2: If I had other choices, I would still get services from this agency.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	334	47.31%	334	47.31%
Agree	230	32.58%	564	79.89%
I am Neutral	71	10.06%	635	89.94%
Strongly Disagree	42	5.95%	677	95.89%
Disagree	25	3.54%	702	99.43%
Doesn't Apply	4	0.57%	706	100.00%

Frequency missing = 2

Q3: I would recommend this agency to a friend or family member.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	334	47.31%	334	47.31%
Agree	230	32.58%	564	79.89%
I am Neutral	71	10.06%	635	89.94%
Strongly Disagree	42	5.95%	677	95.89%
Disagree	25	3.54%	702	99.43%
Doesn't Apply	4	0.57%	706	100.00%

Frequency missing = 2

Social Connectedness Scale

Q33: I know people who will listen and understand me when I need to talk.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	273	39.34%	273	39.34%
Agree	252	36.31%	525	75.65%
I am Neutral	82	11.82%	607	87.46%
Disagree	56	8.07%	663	95.53%
Strongly Disagree	26	3.75%	689	99.28%
Doesn't Apply	5	0.72%	694	100.00%

Frequency missing = 14

Q34: In a crisis, I would have the support I need from family or friends.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	235	33.91%	235	33.91%
Strongly Agree	225	32.47%	460	66.38%
I am Neutral	111	16.02%	571	82.40%
Disagree	73	10.53%	644	92.93%
Strongly Disagree	41	5.92%	685	98.85%
Doesn't Apply	8	1.15%	693	100.00%

Frequency missing = 15

Q35: When I need help right away, I know people I can count on.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	270	39.24%	270	39.24%
Strongly Agree	254	36.92%	524	76.16%
I am Neutral	79	11.48%	603	87.65%
Disagree	49	7.12%	652	94.77%
Strongly Disagree	32	4.65%	684	99.42%
Doesn't Apply	4	0.58%	688	100.00%

Frequency missing = 20

Q37: I am happy with the friendships I have.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	263	37.90%	263	37.90%
Strongly Agree	228	32.85%	491	70.75%
I am Neutral	110	15.85%	601	86.60%
Disagree	49	7.06%	650	93.66%
Strongly Disagree	34	4.90%	684	98.56%
Doesn't Apply	10	1.44%	694	100.00%

Frequency missing = 14

Q36: I have more than one friend.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	243	35.47%	243	35.47%
Strongly Agree	241	35.18%	484	70.66%
I am Neutral	82	11.97%	566	82.63%
Disagree	68	9.93%	634	92.55%
Strongly Disagree	41	5.99%	675	98.54%
Doesn't Apply	10	1.46%	685	100.00%

Frequency missing = 23

Q38: I have people with whom I can do enjoyable things.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	254	36.55%	254	36.55%
Strongly Agree	218	31.37%	472	67.91%
I am Neutral	111	15.97%	583	83.88%
Disagree	66	9.50%	649	93.38%
Strongly Disagree	38	5.47%	687	98.85%
Doesn't Apply	8	1.15%	695	100.00%

Frequency missing = 13

Q39: I feel I belong in my community.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	220	31.70%	220	31.70%
Strongly Agree	182	26.22%	402	57.93%
I am Neutral	157	22.62%	559	80.55%
Strongly Disagree	68	9.80%	627	90.35%
Disagree	58	8.36%	685	98.70%
Doesn't Apply	9	1.30%	694	100.00%

Frequency missing = 14

Improved Functioning Scale

Q30: I do things that are more meaningful to me.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	256	36.31%	256	36.31%
Strongly Agree	203	28.79%	459	65.11%
I am Neutral	157	22.27%	616	87.38%
Disagree	49	6.95%	665	94.33%
Strongly Disagree	30	4.26%	695	98.58%
Doesn't Apply	10	1.42%	705	100.00%

Frequency missing = 3

Q31: I am better able to take care of my needs.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	277	39.46%	277	39.46%
Strongly Agree	222	31.62%	499	71.08%
I am Neutral	133	18.95%	632	90.03%
Disagree	39	5.56%	671	95.58%
Strongly Disagree	24	3.42%	695	99.00%
Doesn't Apply	7	1.00%	702	100.00%

Frequency missing = 6

Q24: I am better able to deal with crisis.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	269	38.21%	269	38.21%
Strongly Agree	194	27.56%	463	65.77%
I am Neutral	139	19.74%	602	85.51%
Disagree	74	10.51%	676	96.02%
Strongly Disagree	24	3.41%	700	99.43%
Doesn't Apply	4	0.57%	704	100.00%

Frequency missing = 4

Q32: I am better able to do things that I want to do.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	244	34.56%	244	34.56%
Strongly Agree	198	28.05%	442	62.61%
I am Neutral	166	23.51%	608	86.12%
Disagree	58	8.22%	666	94.33%
Strongly Disagree	30	4.25%	696	98.58%
Doesn't Apply	10	1.42%	706	100.00%

Frequency missing = 2

Q22: I am better able to handle things when they go wrong.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	263	37.25%	263	37.25%
Strongly Agree	219	31.02%	482	68.27%
I am Neutral	147	20.82%	629	89.09%
Disagree	47	6.66%	676	95.75%
Strongly Disagree	26	3.68%	702	99.43%
Doesn't Apply	4	0.57%	706	100.00%

Frequency missing = 2

Q29: My symptoms don't bother me as much as they used to.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Agree	239	33.95%	239	33.95%
Strongly Agree	169	24.01%	408	57.95%
I am Neutral	129	18.32%	537	76.28%
Disagree	107	15.20%	644	91.48%
Strongly Disagree	53	7.53%	697	99.01%
Doesn't Apply	7	0.99%	704	100.00%

Frequency missing = 4

Crisis Scale

Q12: Crisis services were available and helpful when I needed them.

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Strongly Agree	287	40.83%	287	40.83%
Agree	197	28.02%	484	68.85%
I am Neutral	83	11.81%	567	80.65%
Doesn't Apply	75	10.67%	642	91.32%
Disagree	33	4.69%	675	96.02%
Strongly Disagree	28	3.98%	703	100.00%

Frequency missing = 5

Demographic Information

Gender

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Female	477	68.63%	477	68.63%
Male	218	31.37%	695	100.00%

Frequency missing = 13

Race/Ethnicity

African American

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	702	99.15%	702	99.15%
African-American	6	0.85%	708	100.00%

Asian

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	706	99.72%	706	99.72%
Asian	2	0.28%	708	100.00%

Caucasian

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Caucasian	644	90.96%	644	90.96%
0	64	9.04%	708	100.00%

Hispanic

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	690	97.46%	690	97.46%
Hispanic	18	2.54%	708	100.00%

Ethnicity (Hispanic or Latino)

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	691	97.60%	691	97.60%
Hispanic or Latino	17	2.40%	708	100.00%

Native American

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	640	90.40%	640	90.40%
Native American	68	9.60%	708	100.00%

Indian Tribes

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Blackfeet	12	22.64%	12	22.64%
Cherokee	8	15.09%	20	37.74%
Chippewa-Cree	6	11.32%	26	49.06%
Other	4	7.55%	30	56.60%
Sioux	4	7.55%	34	64.15%
Cheyenne	3	5.66%	37	69.81%
Gros Ventre	3	5.66%	40	75.47%
Salish & Kootenai	2	3.77%	42	79.25%
Cree	2	3.77%	44	83.02%
Crow	2	3.77%	46	86.79%
Assiniboine-Sioux	2	3.77%	48	90.57%
Little Shell	2	3.77%	50	94.34%
Yankton Tribal Affil	1	1.89%	51	96.23%
Apache	1	1.89%	52	98.11%
Turtle Mountain	1	1.89%	53	100.00%

Types of Services Used**Number Currently in Case Management**

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
In Case Management	462	65.25%	462	65.25%
0	246	34.75%	708	100.00%

Day Treatment

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	527	74.44%	527	74.44%
Day Treatment	181	25.56%	708	100.00%

Inpatient Services

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	692	97.74%	692	97.74%
Inpatient Services	16	2.26%	708	100.00%

Medication Management

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	365	51.55%	365	51.55%
Medication Management	343	48.45%	708	100.00%

Residential Treatment

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	660	93.22%	660	93.22%
Residential Treatment	48	6.78%	708	100.00%

Outpatient Services

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Outpatient Services	518	73.16%	518	73.16%
0	190	26.84%	708	100.00%

Vocational Rehabilitation

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	648	91.53%	648	91.53%
Vocational Rehabilitation	60	8.47%	708	100.00%

Length of Time in Services

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Over 5 years	310	43.79%	310	43.79%
1-5 years	279	39.41%	589	83.19%
Missing	94	13.28%	683	96.47%
4 months to 1 year	18	2.54%	701	99.01%
1 to 3 months	7	0.99%	708	100.00%

Types of Funding**Medicaid Eligible**

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Medicaid Eligible	471	66.53%	471	66.53%
0	237	33.47%	708	100.00%

MHSP Eligible

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
0	510	72.03%	510	72.03%
MHSP Eligible	198	27.97%	708	100.00%

Provider

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Western	308	43.50%	308	43.50%
GTCMHC	186	26.27%	494	69.77%
South Central	139	19.63%	633	89.41%
Eastern	63	8.90%	696	98.31%
Aware	12	1.69%	708	100.00%

Living in Urban or Rural Community

	Frequency	Percent	Cumulative Frequency	Cumulative Percent
Urban	611	86.30%	611	86.30%
Rural	97	13.70%	708	100.00%

Means (Averages)

Label	Sample Size	Mean	Standard Deviation	Minimum	Maximum
Age	703	47.01	12.13	19.00	93.00
Miles driven to access services	442	11.09	20.09	1.00	150.00
Blocks walked to access services	124	5.84	3.77	1.00	16.00
Years in Services	614	7.64	6.91	0.17	60.00

Appendix B

CMHS Uniform Reporting System Scales

PERCEPTION OF ACCESS SCALE

- A1 Q4: The location of services was convenient.
- A2 Q5: Staff were willing to see me as often as necessary.
- A3 Q6: Staff returned my call in 24 hours.
- A4 Q7: Services were available at times that were good for me.
- A5 Q8: I was able to get all the services I thought I needed.
- A6 Q9: I saw my psychiatrist as often as I needed to.

PERCEPTION OF QUALITY AND APPROPRIATENESS SCALE

- B1 Q10: Staff here believe that I can grow, change and recover.
- B2 Q13: I felt free to complain.
- B3 Q16: Staff told me what medication side effects to watch out for.
- B4 Q17: Staff respected my wishes about who is and who is not to be given information about my treatment.
- B5 Q19: Staff were sensitive to my cultural background (race, religion, language, etc.).
- B6 Q20: Staff helped me obtain the information I needed so that I could take charge of managing my illness.
- B7 Q14: I was given information about my rights.
- B8 Q15: Staff encouraged me to take responsibility for how I live my life.
- B9 Q21: I was encouraged to use consumer-run programs (support groups, drop-in centers, crisis phone line, etc.).

PERCEPTIONS OF OUTCOMES

- C1 Q22: I am better able to handle things when they go wrong.
- C2 Q23: I am better able to control my life.
- C3 Q24: I am better able to deal with crisis.
- C4 Q25: I am getting along better with my family.
- C5 Q26: I do better in social situations.
- C6 Q27: I do better in school and/or work.
- C7 Q29: My symptoms don't bother me as much as they used to.
- C8 Q28: My housing situation has improved.

PERCEPTION OF PARTICIPATION IN TREATMENT PLANNING

- D1 Q11: I felt comfortable asking questions about my treatment and medication.
- D2 Q18: I, not staff, decided my treatment goals.

PERCEPTION OF GENERAL SATISFACTION

- E1 Q1: I like the services that I received here.
- E2 Q2: If I had other choices, I would still get services from this agency.
- E3 Q3: I would recommend this agency to a friend or family member.

Montana Add-In Scales

SOCIAL CONNECTEDNESS SCALE

- F1 Q33: I know people who will listen and understand me when I need to talk.**
- F2 Q34: In a crisis, I would have the support I need from family or friends.**
- F3 Q35: When I need help right away, I know people I can count on.**
- F4 Q37: I am happy with the friendships I have.**
- F5 Q36: I have more than one friend.**
- F6 Q38: I have people with whom I can do enjoyable things.**
- F7 Q39: I feel I belong in my community.**

IMPROVED FUNCTIONING SCALE

- G1 Q30: I do things that are more meaningful to me.**
- G2 Q31: I am better able to take care of my needs.**
- G3 Q24: I am better able to deal with crisis.**
- G4 Q32: I am better able to do things that I want to do.**
- G5 Q22: I am better able to handle things when they go wrong.**
- G6 Q29: My symptoms don't bother me as much as they used to.**

CRISIS SCALE

- H1 Q12: Crisis services were available and helpful when I needed them.**